PTO/SB/21 (09-04)⁶
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Application Number 09/763,957 Filing Date **TRANSMITTAL** June 18, 2001 First Named Inventor **FORM** Jose BOTELLA MESA Art Unit 1633 (to be used for all correspondence after initial filing) **Examiner Name** M. Marvich Attorney Docket Number 229752001300 Total Number of Pages in This Submission

ENCLOSURES (Check all that apply)				
X Fee Transi	mittal Form	Drawing(s)		After Allowance Communication to TC
Fee Attached		Licensing-related Papers		Appeal Communication to Board of Appeals and Interferences
X Amendment/Reply		Petition		Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
X After Final		Petition to Convert to a Provisional Application		Proprietary Information
Affidavits/declaration(s)		Power of Attorney, Revocation Change of Correspondence Address		Status Letter
X Extension of Time Request		Terminal Disclaimer		X Other Enclosure(s) (please lidentify below):
Express Abandonment Request		Request for Refund		Return Receipt Postcard
Information Disclosure Statement		CD, Number of CD(s)		
Certified Copy of Priority Document(s)		Landscape Table on	CD	•
Reply to Missing Parts/ Incomplete Application		Remarks	······································	
Reply to Missing Parts under 37 CFR 1.52 or 1.53				
		e e		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT				
Firm Name	MORRISON FOE STER LLP			
Signature				
Printed name	Jonathan Bockman			
Date	February 9, 2006		Reg. No.	45,640

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PTO/SB/17 (12-04v2)
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Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number. Complete if Known Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). 09/763.957 **Application Number** June 18, 2001 TRANSMITT Filing Date Jose BOTELLA MESA First Named Inventor For FY 2005 **Examiner Name** M. Marvich 1633 Applicant claims small entity status. See 37 CFR 1.27 Art Unit 229752001300 TOTAL AMOUNT OF PAYMENT Attorney Docket No. METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): x Deposit Account Deposit Account Number: 03-1952 Deposit Account Name: Morrison & Foerster LLP For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below, except for the filing fee x | Charge fee(s) indicated below Charge any additional fee(s) or underpayment of x Credit any overpayments fee(s) under 37 CFR 1.16 and 1.17 **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES SEARCH FEES EXAMINATION FEES Small Entity** Small Entity Small Entity Fees Paid (\$) **Application Type** Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) 500 200 100 Utility 300 150 250 100 50 130 65 Design 200 100 Plant 200 100 300 150 160 80 300 500 250 600 300 Reissue 150 Provisional 200 100 n O Small Entity 2. EXCESS CLAIM FEES Fee (\$) Fee (\$) Fee Description Each claim over 20 (including Reissues) 50 25 200 100 Each independent claim over 3 (including Reissues) Multiple dependent claims 360 180 **Total Claims** Multiple Dependent Claims **Extra Claims** Fee Paid (\$) Fee (\$) Fee Paid (\$) **Extra Claims** Indep. Claims - 8 = 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Number of each additional 50 or fraction thereof Fee Paid (\$) **Total Sheets Extra Sheets** - 100 = (round up to a whole number) x 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) 1252 Extension for response within second month 450.00 Other (e.g., late filing surcharge) SUBMITTED BY Registration No. Signature 45.640 Telephone (703) 760-7769 Name (Print/Type) Jonathan Bockman Date February 9, 2006